

09/857448

ISSUE SLIP STAPLE AREA (for additional cross references)

7/5/01

DO NOT WRITE  
IN THESE SPACES

| POSITION                  | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------|
| FEE DETERMINATION         |          |        |      |
| O.I.P.E. CLASSIFIER       |          |        |      |
| FORMALITY REVIEW          |          |        |      |
| RESPONSE FORMALITY REVIEW |          |        |      |

INDEX OF CLAIMS

..... Rejected      N ..... Non-elected  
..... Allowed      I ..... Interference  
..... (Through numeral) Canceled      A ..... Appeal  
..... Restricted      O ..... Objected

| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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